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Bib Data Sheet

CONFIRMATION NO. 1796

SERIAL NUMBER 10/683,784	FILING DATE 10/10/2003 RULE	CLASS 347	GROUP ART UNIT 2861	ATTORNEY DOCKET NO. 200209936-1
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APPLICANTS

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** CONTINUING DATA ***** *Come*** FOREIGN APPLICATIONS ***** *none*

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** 01/09/2004

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY SPAIN	SHEETS DRAWING 5	TOTAL CLAIMS 47	INDEPENDENT CLAIMS 8
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

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TITLE

Compensation of lateral position changes in printing

FILING FEE RECEIVED 1816	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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		<input type="checkbox"/> 1.18 Fees (Issue)